## ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. Adams St., suite 4600, Phoenix, Arizona 85007 Phone (602) 364-1PET (1738) FAX (602) 364-1039 VETBOARD.AZ.GOV

# **COMPLAINT INVESTIGATION FORM**

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

Date Received: Ftb. 2, 2018 Case Number: 18-63

A.	THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:
	Name of Veterinarian/CVT: Robert J. Thrift, DVM
	Premise Name: Bell Animal & Bird Hospital
	Premise Address: 4336 West bell road #7
	City: Glendale state: AZ zip Code: 85308
	Telephone: <u>602-978-4331</u>
В.	Name: Amelia Speev Address:
	City. State: Zip Code:
	Home Telephone: Cell Telephone:
	*I am able to be reached on my days off, Sunday, Monday, & Tuesday, by cell phone *
*STA	TE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL

RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE-PROVIDE

RECEIVED

HY:

FEB 0 2 2018

COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

C.	PATIENT INFORMATION (1):
	Name: <u>Gary</u>
	Breed/Species: Tabby Cat
	Age: 6 Sex: M Color: Brown & Black
	PATIENT INFORMATION (2):
	Name:
	Breed/Species:
	Age:Sex:Color:
<b>D</b>	VETERINA DIANG WILO HAVE DOOMED CARE TO THE DET TO THE LOCKE
D.	VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:  Please provide the name, address and phone number for each veterinarian.
	1st Pet Veterinary Centers-North Romannia
	520 W. Union Hills Dr #105, Phoenix, AZ 85027
	623-849-0700
	-VET who helped when Dr. Thrift
E.	-VET who helped when Dr. Thrift witness information: failed to do so
	Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.
Colleen	Speer Speer
	A STATE OF THE STA
Alan S	peer
Miralem	TCIC
THURST	
	Attestation of Person Requesting Investigation (See back of page)
D	of page)-
	signing this form, I declare that the information contained herein is true accurate to the best of my knowledge. Further, I authorize the release of
	and all medical records or information necessary to complete the
inve	estigation of this case.
	Signature: Amelia Deen
	Date: 01-30-18

## F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

On January 22, 2018, I found my cat Gary in the backyard with his skin torn from his bottom lip to his neck. His left eye was bulging and his pupil was about 90% constricted. He was unable to close the eye. His entire face was swollen and he was unable to walk. I rushed him to or. Robert J. Thrift and told the technitian, Chris Young, that my cat was in critical condition. There was no sense and it took approximately 30-45 minutes for the veterinarian to see him. They took Gary back for examination and brought him about 45 minutes to an hour later. According. to Dr. Thrift, the X-rays were negative for fractures on both his skull and riticage. He stated, "He looks like hell, but should be okay. I will give you morphine for his pain and evedrops to keep the eye moist. Bring him back at 7, a.m. and we will stitch up his neck." It seemed more urgent than he was making it out to be, so I asked him if I should take Gary to a 24/7 emergency vet. He responded that a place like that would drain me of my money and to only go if things "got worse". He also told me he would be unable to do the eye and neck surgery in the same day because it would take up too much time. At that time he was trying rush me out as they were about to close? I took him home and stayed up all night administering his evedrops and morphine. That night I was reluctant to leave the vet due to Gary's respiratory status, His breathing appeared to be shallow and gurgling.

Ny witnesses made note of this as well. The next morning I arrived at 6:45 fo wait for them to open the doors at 7. Aiisa, who claimed to be the manager, told he that pr. Thrift does not arrive until ne that pr. Inritt uses no wrive until 0 am. and is booked all afternoon. I began to panic and took Gary inside to show her nis status. She was horrified at the sight and said, "I am sickened that Dr. did not urge you to seek immediate urgent care. The only reason he told you he could not do both surgeries in one day is because of how busy he is. He is 79 years old and often forgets things so we have to keep tabs on him and remind him of appointments and what to do. She apologizer said a prayer for my cat, and sent me on my way to seek emergency help. After rushing around to find a place that would nelp, I arrived at 1st pet Veterinary centers- North Valley. There were numerous Vets and surgeons who gave me their opinions. I found out that say had a fractured skull, broken jaw, fractured in, infected firmat, and ulcerated tongue, and infected jaw. I was told that surgery would be risky and more than likely unsuccessful. The vet urged me to put him down and ond his suffering. They said that had 0 a.m. and is booked all afternoon. I began The vet urged me to put him down and end his suffering. They said that had we brought him in vesterday, his survival rate would have been higher. I want Dr. Thrift to refund me the \$500 he charged me, the \$800 that was spent at the emergency vet, wages that were ost due to grief, and for his license to se suspended or revoked.

#### VETERINARY MEDICAL BOARD

Ms. Amelia Speer presented Gary, a DSH feline belonging to her mother on the evening of January 22 2018.

She said she was in California for two days and when she came home she found Gary outside with trauma to the head.

Gary was weak, there was proptosis of the left eye, the skin on the mandible was lacerated a degloving injury of the mandible.

I asked who was taking responsibility? She said she was.

I told her we should take X-rays to assess the possibility of injuries that might require immediate treatment. She agreed.

X-rays of the thorax and skull were taken. I found no life-threatening injuries.

Ms. Speer's male friend asked if Gary was going to make it.

I told him I didn't know. The X-rays showed no life-threatening injuries. He was probably going to lose the eye. Gary didn't look too good. There could be other problems not visible.

Ms. Amelia Speer asked if the eye surgery and soft tissue surgery could be done at the same time.

I told her the longer the anesthesia the greater the chance for anesthetic complications.

The enucleation (eye surgery) should be done separate due to the time of surgery.

Emergency treatment was started.

Fluid lactated ringer 400 ml subcutaneous for hydration to stabilize Gary for more definitive procedures.

Cefazolin antibiotic 225 mg IM was given to decrease bacteria infection and swelling

to make Gary a better candidate for surgery.

The laceration was rinsed with a dilute betadine solution to decontaminate

the exposed tissue. Buprenorphine 0.15 ml was given for pain and artificial

tear ointment was given to moisten the eyes.

I gave Ms. Amelia Speer the option of taking Gary home and return in the AM or go to the emergency clinic that night

Someone would be here at 7:00 AM. Blue Pearl emergency clinic's address was given to her.

I told her they were not cheap. I never said the emergency clinic would drain her of her money.

Post-operative care would be needed through the night and we couldn't offer this. We are not a 24 hr. Facility.

I came in early the next morning. I asked Alissa, my receptionist if she heard from Ms Speer. She said they took him to the emergency clinic. They wanted me to call. Ms. A Speer said the emergency veterinarian said there was too much swelling to place a tracheal tube, so they put him down.

I then called the mother she said they wanted full reimbursement for everything and she was going to file a complaint with the veterinary board.

Respectably

Robert J. Thrift DVM

4336 W. Bell Rd.#7

Glendale, Arizona 85308



# VICTORIA WHITMORE - EXECUTIVE DIRECTOR -

## ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS STREET, STE. 4600, PHOENIX, ARIZONA 85007 PHONE (602) 364-1-PET (1738) • FAX (602) 364-1039 VETBOARD.AZ.GOV

## INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: AM Investigative Committee: Robert Kritsberg, D.V.M. - Chair

Ryan Ainsworth, D.V.M. Christina Tran, D.V.M.

Mary Williams

**STAFF PRESENT:** Tracy Riendeau, CVT – Investigations

Victoria Whitmore, Executive Director Sunita Krishna, Assistant Attorney General

RE: Case: 18-63

Complainant(s): Amelia Speer

Respondent(s): Robert Thrift, D.V.M. (License: 1204)

#### SUMMARY:

Complaint Received at Board Office: 2/2/18

Committee Discussion: 5/1/18

Board IIR: 6/20/18

#### APPLICABLE STATUTES AND RULES:

Laws as Amended July 2014

-(Salmon); Rules as Revised September

2013 (Yellow).

On January 22, 2018, "Gary," a 6-year-old male tabby cat was presented to Respondent on emergency with traumatic injuries to the head. Respondent examined the cat, took radiographs and discharged the cat with pain medication and eye drops. He instructed Complainant to return the next day for wound closure.

The next day, Complainant returned with the cat as instructed and was sent to an emergency facility by hospital staff. Once at an emergency facility the cat was humanely euthanized due to the severity of his injuries.

Complainant contends Respondent was negligent in the care of the cat.

Complainant was noticed and appeared. Witness, Colleen Speer, appeared. Respondent was noticed and appeared with counsel, David Stoll.

#### The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: Amelia Speer
- Respondent(s) narrative/medical record: Robert Thrift, DVM
- Consulting Veterinarian(s) narrative/medical record: 1st Pet Veterinary Centers
- Witness(es) narrative: The Speer family

#### PROPOSED 'FINDINGS of FACT':

- 1. On January 22, 2018, the cat was presented to Respondent with traumatic injuries, source unknown. After waiting quite some time, the cat was taken into the treatment area for evaluation from Respondent. Upon exam, the cat had a weight = 16.7 pounds, a temperature = 102.7 degrees, a heart rate = 172bpm and a respiration rate = 40rpm. Respondent noted that the cat had a degloving injury to the mandible and proptosis of the left eye. Radiographs were taken of the thorax and skull and no life threatening injuries were noted. The cat was administered the following:
  - a. Cefazolin 225mg IM; and
  - b. Lactated Ringer's Solution 400mLs SQ.
- 2. Respondent stated that he flushed the laceration on the mandible with dilute betadine (not documented in medical record) and gave buprenorphine 0.15mLs for pain. It was also noted that he dispensed artificial tears to be administered three times a day. According to Complainant, Respondent dispensed morphine for the cat (not documented in the medical record, the record does state buprenorphine HCL 1.00mL 0.15mL) along with the eye drops. Respondent further stated that he gave Complainant the option of taking the cat home and returning in the morning or going to an emergency facility that evening. Complainant stated that she asked if she should take the cat to an emergency facility and was discouraged to do so unless the cat got worse.
- 3. The next day, Complainant was concerned with the cat's breathing and went to Respondent's premise prior to opening. When they opened, at 7:00am, the manager advised Complainant that Respondent would not be in until 10:00am and referred her to an emergency facility.
- 4. Upon arrival at 1st Pet Veterinary Centers, Dr. Harrigan evaluated the cat the cat was placed in oxygen, an IV catheter was set and fentanyl was administered. She met with Complainant to express her concerns with the cat's wounds --- fractured mandible, exophthalmous of the left eye, infected degloving mouth wound --- the eye would need to be enucleated at a later date.
- 5. Dr. Harrigan recommended repeating thoracic radiographs which was approved. Radiographs revealed rib fractures but no overt trauma to the lung parenchyma. Complainant was presented with an estimate for surgical repair and management. Dr. Harrigan further expressed concern with the cat's ability to eat due to the oral cavity swelling and offered to place an esophagostomy tube as well. Due to the cat's condition and financial limitations Complainant and her family elected to humanely euthanize the cat.

## **COMMITTEE DISCUSSION:**

The Committee expressed concerns that Respondent did not refer the cat to an emergency facility immediately and not recommend the cat return to him the following day. The medical records do not indicate Respondent referred the cat to an emergency facility and the testimony corroborated that fact. Complainant was discouraged to take the cat to a 24 hour premise and told it was expensive.

Additionally, Complainant arrived at Respondent's premise the following day 15 minutes prior to the clinic opening as she was instructed to by Respondent. Respondent's staff explained that Respondent would not be available until later that day and to go immediately to an emergency facility.

### COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that possible violations of the Veterinary Practice Act occurred.

### COMMITTEE'S RECOMMENDED DISPOSITION:

**Motion:** It was moved and seconded the Board find:

ARS § 32-2232 (12) as it relates to AAC R3-11-501 (3) failure to refer the cat to an emergency facility and document it in the medical record;

ARS § 32-2232 (11) Gross negligence; for failure to diagnose the rib fractures and mandibular symphyseal fracture on radiographs or physical exam on January 22, 2018 which led to unnecessary suffering or death; and

ARS § 32-2232 (21) as it relates to AAC R3-11-502 (L) (8) failure to document the amount, concentration and frequency of buprenorphine prescribed on January 22, 2018.

**Vote:** The motion was approved with a vote of 4 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.

Tracy A. Riendeau, CVT Investigative Division

# DOUGLAS A. DUCEY GOVERNOR



VICTORIA WHITMORE EXECUTIVE DIRECTOR

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CERTIFIED MAIL 70163010000000099477

October 1, 2018

Robert Thrift, DVM ADDRESS ON FILE

LETTER OF CONCERN – 18-63 - In Re: Robert Thrift, DVM

Dear Dr. Thrift:

At its meeting on August 15, 2018 the Arizona State Veterinary Medical Examining Board considered information presented in the complaint case brought by Ms. Amelia Speer regarding her cat "Gary" that had been presented to you in January 2018.

In each case, the Board considers the situation and the professional's response, as well as all relevant information. In this matter, after review and discussion, the Board voted to issue you a Letter of Concern pursuant to A.R.S. § 32-2234 (D) regarding:

- (1) the need to appropriately consider radiographic interpretation in high trauma cases; and
- (2) the need to ensure communication with hospital staff and pet owners is clear so that the expected next steps in the care and treatment of the animal are understood correctly.

A Letter of Concern is defined in A.R.S. § 32-2201(12) as "...an advisory letter to notify a veterinarian that, while there is insufficient evidence to support disciplinary action about certain aspects of the case, the Board believes the veterinarian should modify or eliminate certain practices and that continuation of the activities that led to the information being submitted to the Board may result in action against the veterinarian's license."

We hope you will take this advisory letter in the spirit that it is intended to avoid any other potential violations in the future.

Respectfully, FOR THE BOARD

Victoria Whitmore Executive Director

cc: Ms. Amelia Speer

# DOUGLAS. A DUCEY GOVERNOR



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IN ACCORDANCE WITH § A.R.S. 32-2237(D): "IF THE BOARD REJECTS ANY RECOMMENDATION CONTAINED IN A REPORT OF THE INVESTIGATIVE COMMITTEE, IT SHALL DOCUMENT THE REASONS FOR ITS DECISION IN WRITING."

At the August 15, 2018 meeting of the Arizona State Veterinary Medical Examining Board, the Board conducted an Informal Interview in Case 18-63, In Re: Robert Thrift, DVM.

The Board considered the Investigative Committee Findings of Fact, Conclusions of Law, and Recommended Disposition:

ARS § 32-2232 (12) as it relates to AAC R3-11-501 (3) failure to refer the cat to an emergency facility and document it in the medical record;

ARS § 32-2232 (11) Gross negligence; for failure to diagnose the rib fractures and mandibular symphyseal fracture on radiographs or physical exam on January 22, 2018 which led to unnecessary suffering or death; and

ARS § 32-2232 (21) as it relates to AAC R3-11-502 (L) (8) failure to document the amount, concentration and frequency of buprenorphine prescribed on January 22, 2018.

Following the informal interview with Respondent, the Board felt Respondent discussed referral to an emergency clinic with the pet owner and that it is not required to document that information in the medical record. Thus the Board did not agree with the Investigative Committee's failure to refer violation.

With respect to the radiograph interpretation, the Board felt that it was not unreasonable that Respondent missed the rib fracture. The fractures were not life-threatening and did not impact the care that was provided. The Board did issue Respondent a Letter of Concern with respect to considering radiographic interpretation in high trauma cases and/or when needed and communication with hospital staff and pet owners to ensure all parties understand what the expected next steps will be in the care and treatment of the animal.

The Board did agree with the Investigative Committee's medical record keeping violation.

Respectfully submitted this 19th day of September, 2018.

Arizana State Veteringry Medical Examining Board

Jim Loughead, Chair